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The right call for stroke is 9-1-1

In an education campaign starting this month, Frances Mahon Deaconess Hospital (FMDH) and the Montana Cardiovascular Health Program are reminding residents of northeastern Montana that the fastest route to stroke treatment is the ambulance.

"Making the right call is critical in the path to stroke recovery," said Joy Linn, RN, BC ER Area Coordinator and Trauma Coordinator at FMDH. "The ambulance service alerts medical and radiology staff. Care starts sooner when patients arrive by ambulance."

Stroke occurs when blood flow to an area of the brain is interrupted. During a stroke, about two million brain cells die every minute.

"Urgent treatment is needed," said Linn.

For the most common type of stroke, clot-busting medication can be given to interrupt the stroke and limit the damage stroke can cause. Long-term disability can be prevented if blood flow is restored quickly. The catch is that the medication must be given within four and a half hours from the start of symptoms.

"The time it takes to get a patient to a larger medical center can rule out treatment options. The best chance of recovery comes with very early treatment," Linn explained.

The solution is the Montana Telestroke Program, which uses technology to combat the critical time factor. Frances Mahon Deaconess Hospital is one of 12 rural hospitals in the state equipped with telestroke—internet-based two-way audio and video communication with a neurologist.

Through the telestroke system, a stroke neurologist in Great Falls, Colorado, Oregon or Washington can examine a patient in Glasgow. The neurologist is able to view brain images and lab results. FMDH staff members help with the patient's physical assessment. Ultimately, a timely diagnosis and treatment plan is provided.

"Our telestroke capabilities allow rural residents to receive the stroke care they need, 24/7," Linn said. "We can connect a patient with a doctor who has seen many, many strokes. When patients with non-typical presentations of stroke symptoms come through our doors, our staff can have confidence in our patient care because we have the guidance of a neurologist specializing in stroke."

Linn reports that the hospital saw 18 patients in the ER that met criteria as a stroke patient during 2016. Of those 18, 10 came by ambulance and the rest by private vehicle. Three met criteria to be given the clot-buster drugs. Telestroke was activated twice.

"Minutes matter in the treatment of stroke," she emphasized. "Know the signs and be ready to act if you or someone you know is having a stroke, even if you're not sure. Call 9-1-1 immediately."

In the 2016 Community Health Needs Assessment developed for Phillips, Daniels, Valley and Roosevelt counties, the Glasgow hospital determined that heart disease and stroke are its top health priority, based on the scope and severity of the problem, and the ability of the hospital to have a significant impact. In the four-county service area, the age-adjusted rate of stroke is 50 percent higher than in Montana or the nation.

"Stroke is a leading cause of long-term adult disability—a life-changing event for an individual and their family. The more you know about stroke, the better you can protect yourself and the people you care about,"

Linn added.

Nine out of ten strokes can be prevented through healthy behaviors and control of risk factors like high

| | Area | MT | US |
|--|-------|-------|-------|
| Diseases of the heart (Age-adjusted Death Rate) | 223.5 | 154.2 | 175.0 |
| Stroke (Age-adjusted Death Rate) | 57.0 | 37.9 | 37.9 |

blood pressure. For more information about stroke, visit strokeassociation.org. Talk to your doctor to learn your risk of stroke.

Sudden Signs of Stroke

- Numbness or weakness of the face, arm or leg, especially on one side of the body
- Confusion, trouble speaking or understanding others
- Trouble seeing in one or both eyes
- Dizziness, loss of balance or trouble walking
- Severe headache with no known cause